

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****Applicant(s):** Yasuhiro Mori et al.**Examiner:** Lenard A. Footland**Application** 10/697,583**Confirmation** 7690**Filed:** October 29, 2003**Group Art** 3682**For:** **BEARING DEVICE**

Mail Stop Non-Fee Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Sir:

Transmitted herewith is a Response to the Office Action of March 2, 2005 for the above-identified patent application.

FEE FOR ADDITIONAL CLAIMS☒ A fee for additional claims is not required.☐ A fee for additional claims is required.

The additional fee has been calculated as shown below:

	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	Rate	Additional Fee
Total Claims	3	- 3	= 0	x \$50.00	= \$0.00
Independent Claims	1	- 1	= 0	x \$200.00	= \$0.00
First Presentation of a Multiple Dependent Claim				+ \$360.00	= \$0.00

TOTAL = \$0.00

- ☐ A check in the amount of \$XXX in payment of the fee for additional claims is transmitted herewith.
- ☒ The Commissioner is hereby authorized to charge payment of any additional fees required under 37 C.F.R. §§ 1.17 and 1.20 in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to Deposit Account No. 50-0675, Order No. 051319.0061. A duplicate copy of this transmittal letter is transmitted herewith.
- ☐ Please Charge \$XXX to Deposit Account No. 50-0675, Order No. 051319.0061 in payment of the fee for additional claims. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

- ☐ The following extension fee is applicable to the Reply filed herewith: \$XXX extension fee for response within XXX month(s) pursuant to 37 C.F.R. § 1.136(a).
- ☐ A check in the amount of \$XXX in payment of the extension fee is enclosed herewith.
- ☒ The Commissioner is hereby authorized to charge payment of any additional extension fee required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to Deposit Account No. 50-0675, Order No. 051319.0061. A duplicate copy of this transmittal letter is transmitted herewith.
- ☐ Please charge \$XXX extension fee to Deposit Account No. 50-0675, Order No. 051319.0061. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,

Schulte Roth & Zabel LLP
Attorneys for Applicant(s)
919 Third Avenue
New York, NY 10022
212-756-2000

Dated: April 1, 2005
New York, New York

By: 

Reine H. Glanz, Esq.
Reg. No. 46,728

CERTIFICATE OF MAILING

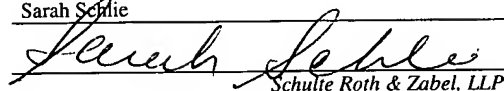
Date of Deposit: April 1, 2005

I hereby certify under 37 C.F.R. 1.8 that this correspondence and enumerated documents are being deposited with the United States Postal Service as First Class Mail with sufficient postage on the date indicated above and is addressed to the Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name:

Sarah Schlie

Signature:


Schulte Roth & Zabel, LLP